

IN THE UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF ALABAMA

RE'NAUL M. JOHNSON
(ARIEL A. ADLA),
Plaintiff,

VS.

HONORABLE RICHARD FRANK
ALLEN, et al.,
Defendant(s).

CASE NO.: 07-0278 -KD-M

PETITIONER'S DECLARATION AFFIDAVIT IN SUPPORT OF
PETITIONER'S APPLICATION FOR A TEMPORARY RESTRAINING
ORDER
AND/OR IN THE ALTERNATIVE
APPLICATION FOR A PRELIMINARY INJUNCTION

COMES NOW, Re'Naul M. Johnson (Ariel A. Adla), the Plaintiff, pro se,
pursuant to the Alabama Rules Of Court-Alabama Federal Rules Of Civil
Procedure (A. Fed. R. Civ. P.), Rule 65, whose name is otherwise unknown to
the undersigned Notary Public, for the State Of Alabama, at Large, and thereby,
being personally known to me, does hereby, affirm, attest, depose and/or swears
under such Oath of notary, as follow:

1. My correct, legal, and true name is Princess Ariel Aasiya Adla.

However, I am currently convicted and sentenced within the physical
confined control, custody and security of the State Of Alabama Department
Of Corrections, under my former name of Re'Naul M. Johnson.

2. I am the Petitioner, pro se, within this said instant cause of action.

3. I am currently incarcerated within the confinements of the Alabama Department Of Corrections, at G.K. Fountain Correctional Center, Fountain 3800, Atmore, Alabama 36503-3800.

4. I am over twenty-one (21) years of age, and I do have personal knowledge of the fact(s), as hereby, follow:

5. I have been incarcerated within the physical care, custody and control of the Alabama Department Of Corrections, since October 21, 2004, thereby, serving a Fifty (50) year sentence, as imposed, by the Circuit Court Of Houston County, Alabama, Twentieth (20Th) Judicial Circuit, in regards to Houston County, Alabama, Circuit Court, Case Number CC-03-1861, Assault II (Second (2nd) Degree), as defined, pursuant to the Criminal Code Of Alabama, 1975, as amended, Title §13A-6-21(a)(5); along with the criminal offense of Intimidating A Witness, as defined, pursuant to the Criminal Code Of Alabama, 1975, as amended, Title §13A-10-123.

6. I was sentenced, by the Circuit Court Of Houston County, Alabama, Twentieth (20Th) Judicial Circuit, to serve a prison term (sentence) of Twenty-five (25) years on each criminal offense, as charged, to be served consecutive to the other, in which is an aggregate total prison term (sentence) to be served in prison.

7. As set forth within the written contents of this referenced 42 United States Constitution §1983 Civil Right(s) Complaint, in which was filed within the lawful jurisdiction of the United States District Court, For The Southern District, Mobile, Alabama, I was medically and psychologically diagnosed with Gender Identity Disorder, particularly, Gender Dysphoria, specifically, Transsexual Type, years prior to my current incarceration within the Alabama Department Of Corrections (A.D.O.C.).

8. Prior to my current incarceration, my medical diagnosis of Gender Identity, particularly, Gender Dysphoria, specifically, Transsexual Type, has been medically treated for years with Estrogen, hormonal therapy, specifically, Premarin, at 1.25 mg. three (3) times each (per) day. **(See Exhibit #1)**

9. Also, prior to my current incarceration, my medical diagnosis of Gender Dysphoria, Transsexual Type was medically treated with the a constitutionally structured prescribed standard medical care of treatment and therapy, namely, an estrogen (effeminate) hormonal therapy, in the form of Premarin, initially at .32 mg. each (per), in which later was advanced, by Dr. Jack Blalock, M.D., Endocrinologist, Manchester Parkway, Columbus, Georgia, in which, at a latter time, such prescribed dosage was prescribed, for me to take this prescribed medication, at 1.25 mg., three (3) day each (per) day. **(See Exhibit #2)**

10. On October 2, 2003, after, an arrest, for committing alleged criminal offense(s), I was booked and placed within the physical care and control of the Houston County Jail, where, I was incarcerated within that confinement, until October 21, 2004, where, in which, at such time, I was released, from, the physical custody of the Houston County Jail, to the physical care, custody and control of the Houston County, Alabama, Sheriff's Department, Houston County Jail, to the actual physical care, custody and control of the Alabama Department Of Corrections, (A.D.O.C.).

11. Throughout my entire incarceration within the confinements of the Houston County Jail, Dothan, Alabama, from October 2, 2003, through, October 21, 2004, with the exception, from late August, 2003, or the beginning of September, 2003, in which such treatment was to be temporarily interrupted, due to the fact that Houston County Jail's medical physician, Dr. Banner, M.D., needed to get an accurate reading on some of my blood work, in regards to my liver, in which me receiving hormonal therapy, during this period in all probability would have led to inaccurate blood work, in regards to my liver, so Dr. Banner, M.D., issued a written order of instruction to have my hormonal treatment and therapy temporarily interrupted, until, he had completed my blood work, in regards to my liver, I was medically treated with the prescribed hormonal medical care, treatment and therapy of Estrogen, specifically, Premarin, at 1.25 mg. three (3) times each (per) day.

12. On October 21, 2004, after being released, from, the physical care, custody and control of the Houston County Jail, Dothan, Alabama, and upon entering, the Alabama Department Of Corrections, my medically prescribed hormonal medical care, treatment and therapy, in the prescribed form of Estrogen, specifically, Premarin, at 1.25 mg. three (3) times each (per) day, as prescribed, by qualified medical specialist was discontinued, and therefore, as a subsequent result, at the period of time, I then, became deprived of a constitutionally structured prescribed adequate standard of medical care, treatment and therapy, in which, I had been receiving, for years, prior to this current incarceration within the confinements of the Alabama Department Of Corrections, (A.D.O.C.).

13. The Alabama Department Of Corrections, thereby, contracted to Prison Healthcare Services (hereinafter referred to as PHS), its constitutional duty of providing adequate healthcare to inmates, in which are confined within their immediate physical care, custody and control.

14. On October 21, 2004, upon me entering and being placed into the physical care, custody and control of the Alabama Department Of Corrections, the Alabama Department Of Corrections, thereby initially, failed to employ, an administrative directive/regulation, in which should have mandated, a constitutionally recognized structure prescribed adequate standard medical care, treatment and therapy, for treating the medical diagnosis of Gender Identity Disorder, particularly, Gender Dysphoria, specifically,

Transexual Type.

15. On December 4, 2004, Dr. Donna Earnshaw, M.D., employed, by Mental Healthcare Management, Inc., (hereinafter referred to as MHM), contracted, by the Alabama Department Of Corrections to provide inmate inmate healthcare services, and assigned to G.K. Fountain Correctional Center, Fountain 3800, Atmore, Alabama 36503-3800, advised Dr. Robert Barnes, M.D., employed, by Prison Healthcare Services (hereinafter referred to as PHS), also contracted, by the Alabama Department Of Corrections to provide inmate healthcare and medical services, and also, assigned to G.K. Fountain Correctional Center, Fountain 3800, Atmore, Alabama 36503-3800, on several distinct, different and separate instances and occasions, that it would be the best interest of my medical and psychological health to re-instate, the prescribed standard medical care, treatment and therapy, in which I had been receiving, for years, Dr. Earnshaw, M.D., also advised, Dr. Barnes, M.D., the medical treatment (specifically, female hormonal therapy), in which and had actively received, for years prior to my incarceration had been verified, by the record, however, Dr. Barnes, M.D., still failed and refused to comply with the adequate standard care of medical treatment and therapy, as prescribed, by qualified medical specialist, as I had received, for years prior to my current incarceration.

16. On February 18, 2005, Jerry Ferrell, Head Warden, G.K. Fountain Correctional Center, Fountain 3800, Atmore, Alabama 36503-3800, within the contents of a written affidavit of Warden Ferrell, as submitted to another court,

regarding another unrelated matter. Warden Ferrell, stated that, the Plaintiffs, as listed and named within this instant said cause of medical complaints have centered around the Plaintiff seeking a "sex change" procedure and/or hormone therapy. Within the content(s) of Warden Ferrell's writtten affidavit, he further stated that, "as a warden of a male correctional facility and as a taxpayer of the State Of Alabama and this Defendant (he/Warden Ferrell) hopes and prays that medical treatment in that form is denied and will continue to be denied.

This Defendant (he/Warden Ferrell) avers that Plaintiff has not been denied other reasonable medical treatment." Thus Warden Ferrell was deliberately indifferent to my specific medical diagnoses of Gender Dysphoria-Transsexual Type, in which recognized, by the United States Constitution, as a serious medical need.

(See Exhibit #4)

17. On November 16, 2005, the Alabama Department Of Corrections, thereby released, a publicized administrative regulation, specifically, the Alabama Department Of Corrections-Administrative Regulation #637, **GENDER IDENTITY DISORDER(S)**, in which specifically, mandated and prescribed the particular and specific constitutionally structured standard of prescribed adequate medical care, treatment and therapy, in which was to be prescribed to inmates incarcerated within the confinements of the Alabama Department Of Corrections that was diagnosed with Gender Identity Disorder, specifically, Gender Dysphoria-Transsexaul Type, Male-To-Female.

(See Exhibit #5)

18. On May 27, 2006, Dr. Robert Barnes, M.D., finally without incident, thereby wrote a standing medical order and instruction, for me to be re-instated, Estrogen (female) Hormones, specifically, Menest, also a form of Estrogen, an equivalent to Premarin, at 1.25 mg., Three (3) times (per) each day, for a hundred twenty (120) day period of time to last through, September 23, 2006, in which, such constitutionally structured prescribed adequate standard medical care, treatment and therapy that I received prior to my current incarceration within the confinements of the Alabama Department Of Corrections, and such medical care, treatment and therapy, in which, Dr. Barnes, M.D., actively prescribed, on May 26, 2006, was mandated, according to the governing authority of the Alabama Department Of Corrections-Administrative Regulation #637, GENDER IDENTITY DISORDER. **(See Exhibit(s) 3 & 5)**

19. On July 27, 2006, the Alabama Department Of Corrections, through, Dr. George Lyrene, as employed, as the Director or Assistant Director Of Inmate Medical Treatment, singularly, by himself, overrode the majority of the appointed committee and treatment team, under the authority of PHS and MHM, as established, by the Alabama Department Of Corrections-Administration Regulation #637, **GENDER IDENTITY DISORDER(S)**, in which are concurrently and actively in charge of treating inmates incarcerated within the physical care of the Alabama Department Of Corrections that has been associated with the diagnosis of Gender Identity Disorder(s), as proscribed, pursuant to the authority of the Alabama Department Of Corrections-

Administrative Regulation, #637, **GENDER IDENTITY DISORDER(S)**, thereby arbitrarily and capriciously with deliberate indifference, intervened and interrupted the decision and authorization of the majority of the committee was actually in favor of re-instating female hormonal therapy, in which was subsequently received, by me, prior to my current incarceration. The authorized treatment committee, as established, under the governing authority of the Alabama Department Of Corrections, concurred with the constitutionally standard medical care and treatment of female hormones, as prescribed to me, by my free-world medical specialist, and thus, on May 4, 2004, thereby authorized Dr. Robert Barnes, M.D., Institutional Medical Physician to prescribe and order such, in which was prescribed, ordered and received, by me, on May 26, 2006. However, on July 27, 2006, Dr. George Lyrene, M.D., abruptly discontinued the structured prescribed constitutional standard medical care, treatment and therapy of the Plaintiff's female hormonal therapy, as prescribed, by Dr. Barnes, M.D., Institutional Medical Physician, as authorized, by the medical treatment team, as established, under the governing authority of the Alabama Department Of Corrections, for such written prescribed order and instruction, as prescribed, written and ordered, by Dr. Barnes, M.D., was prescribed and order, for the Plaintiff to receive, throughout, September 26, 2006. **(See Exhibit #3)**

20. Since, I have been incarcerated within the confinements of the Alabama Department Of Corrections, through, their deliberate indifference of the Eighth (8th) Amendment, as guaranteed and secured, under the governing provision(s) of the United States Constitution, along through their own departmental authority, as provided, under the Great Seal of the State Of Alabama, pursuant to the governing provision(s) of the Alabama Department Of Corrections-Administrative Regulation, #637, **GENDER IDENTITY DISORDER(S)**, I have been deprived of a constitutionally structured, prescribed standard of medical care, treatment and/or therapy, as I actually received, prior to my current incarceration. I have also suffered irreparable damage harm and injury, in which, the Defendant(s) was the proximate cause of the injuries received. As a result of my deprivation, in which, I received, from the Defendant(s), as listed and named within this instant said cause of action, I have experienced excessive weight gain, complete body fat redistribution, dizzy spells, fainting spells, headaches, hot-flashes, anxiety, severe depression, more depression than usual, as associated with this particular and specific medical, psychiatric and psychological diagnosis, Gender Dysphoria Transsexual Type, Male-To-Female, the growth of first time facial hair, in which it is mandated and required, by the Alabama Department Of Corrections, for an inmate (prisoner) to be clean shaved, at all times. This subsequently caused me to suffer skin scarring in my face, as a subsequent result of me having to shave on a daily basis, in a sincere effort of removing any facial hair, from my face,

as mandated and required of me within my immediate environment, by the inmate rules and regulations of the Alabama Department Of Corrections.

(See Exhibit(s) 6 & 7)

21. The irreparable damage, harm and injuries, in which, I have received, as a result of the deliberate conduct of the Defendant(s), as listed and named within this instant said cause of action is cruel and unusual punishment and the proximate cause of such injuries, due to their breach of inherited duty of uphold their oath, along with their failure and/or refusal to uphold the Alabama Constitution, 1901, along with the their failure and/or refusal to honor and respect the governing provision(s) of the Eighth (8th) Amendment, as guaranteed and secured, by the United States Constitution.

22. For the foregoing reason(s), this Most Honorable Court should grant the Plaintiff, Application For A Temporary Restraining Order And/Or In The Alternative An Application For A Preliminary Injunction, in all aspect(s), thereof.

**I DO HEREBY ACKNOWLEDGE THAT STATEMENT(S) AS
CONTAINED WITHIN THE WRITTEN CONTENT(S) OF THIS
AFFIDAVIT IN SUPPORT OF APPLICATION FOR A TEMPORARY
RESTRAINING ORDER AND/OR IN THE ALTERNATIVE
APPLICATION FOR A PRELIMINARY INJUNCTION.**

Re'Naul M. Johnson

X Ariel A. Adla

Re'Naul M. Johnson

(Ariel A. Adla)

Petitioner, pro se,

Affiant

5-4-07

Date

**STATE OF ALABAMA
COUNTY OF ESCAMBIA**

SWORN TO AND SUBSCRIBED BEFORE ME on this 4 day
of May, 2007.

G. T. Sarno

NOTARY PUBLIC

My Commission Expires:

1/12/2011

CERTIFICATE OF SERVICE

I do hereby certify that on this 4th day of May, 2007, I have served a copy of the foregoing **Plaintiff's, Affidavit In Support Of Application For A Temporary Restraining Order And/Or In The Alternative Application For A Preliminary Injunction**, by placing, a true and exact copy of same within the Internal Inmate Mailing System, at G.K. Fountain Correctional Center, Fountain 3800, Atmore, Alabama 36503-3800 (United States Mail), postage pre-paid and properly addressed, as hereby, follows:

Alabama Department Of Corrections
Legal Division
ATTN: Honorable Kim Tobis Thomas
Assistant General Counsel
Assistant Attorney General
101 Union Street
Post Office Box 301555
Montgomery, Alabama 36130

Respectfully Submitted,

Re'Naul M. Johnson
Ariel A. Adla

Re'Naul M. Johnson, #166237,
(Ariel A. Adla)
G.K. Fountain Corr. Center
Fountain 3800
Atmore, Alabama 36503-3800

EXHIBIT #1

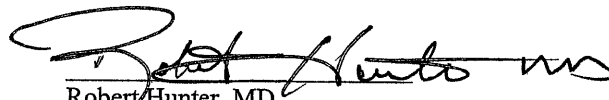
IN THE CIRCUIT COURT OF
MONTGOMERY COUNTY, ALABAMA

RE'NAUL M. JOHNSON,	(#166237),)	
)	
Petitioner,)	
)	
vs.)	CIVIL ACTION NO. CV-2005-645
)	
ALABAMA DEPARTMENT OF)	
CORRECTIONS, et al.,)	
)	
Respondents.)	

Affidavit of Robert Hunter, MD

Before me, the undersigned authority, a Notary Public, in and for said County and State of Alabama at Large, personally appeared Robert Hunter, MD, who being known to me and being by me first duly sworn, deposes and says on oath as follows:

My name is Robert Hunter, MD, and I am over twenty-one (21) years of age. Upon the request of Ron Cavanaugh, PsyD, Alabama Department of Corrections, Director of Treatment, I reviewed the records of ReNaul Johnson AIS #166237 and prepared the attached Memorandum dated May 4, 2006.


Robert Hunter, MD
MHM, Inc. Alabama

SWORN TO AND SUBSCRIBED before me this 5th day of May, 2006.


NOTARY PUBLIC

MY COMMISSION EXPIRES 3/6/08

Memo

To: Ron Cavanaugh, PsyD
ADOC, Director of Treatment

From: Robert Hunter MD
MHM, Inc Alabama

Date: May 4, 2006

Re: Inmate Re'Naul Johnson #166237

This is a treatment summary on inmate Re'Naul Johnson #166237, who is a 38 year old African American, presently incarcerated at Fountain Correctional Facility. This summary is based on review of the mental health records from December 2004 to present, including his initial psychiatric assessment by Donna Earnshaw, MD on December 3, 2004, as well as subsequent progress notes. Mr. Johnson is a pre-op transsexual treated with Premarin for at least a seven year period prior to incarceration. He had been living as a "woman" for some time and was expecting to have sexual reassignment surgery prior to his arrest. Since being in ADOC custody he has not been on any hormonal treatment, resulting in the inmate seeking redress through the courts. He has suffered from anxiety and depression associated with the before mentioned concerns, and as such has been followed by the mental health staff at Fountain. His initial psychiatric assessment noted him as being quite feminine in appearance and demeanor, but otherwise normal except for situational anxiety. He was given a diagnosis of Gender Identity Disorder and Adjustment Disorder with Mixed Features of Anxiety and Depression. He has been prescribed antidepressants, such as Effexor, Prozac and Wellbutrin at various times. Presently, he is on Wellbutrin 150 mg per day and Trazadone 50 mg at bedtime. His treatment course has been fairly stable. There have been no episodes of self-injurious or suicidal behavior; or any instances of aggression or violence. He has been free of any psychotic symptoms. He continues to have anxiety and depression, which seems situational. His compliance with treatment has varied. He regularly attends his sessions with his primary therapist, Dr. Lindman, as well as with Dr. Earnshaw. He has been resistant to involve himself in group therapy, and at times will not take his medication as prescribed. He will not go to pill call for fear of being around other inmates. He continues to assert the courts will rule in his favor for hormonal therapy and remains insistent for this procedure.

If there are any further questions, please feel free to contact me at 334-264-9460.

EXHIBIT #2

JACK H. BLALOCK, JR. M.D. P.C.

ADOLESCENT MEDICINE • ENDOCRINOLOGY

CONFIDENTIAL MEDICAL RECORDS

NUMBER OF PAGES TRANSMITTED INCLUDING THIS COVER PAGE 3

DATE: 12/29/04

TIME: _____

FAX TO: PHS

FAX# 334-215-9126

FACSIMILE TRANSMISSION

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Office 706 / 327-4317

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ST. FRANCIS MED. PARK BLDG. F-1 • 2300 MANCHESTER EXPRESSWAY • COLUMBUS

CONFIDENTIAL MEDICAL RECORDS

NAME Adla, Ariel
CHART # 13867DATE 6-13-03WEIGHT 306
(124/170 lb)HEIGHT 5'8 1/2"BP 120/72
HRARIEL ADLA
JUNE 13, 2003

SUB.; This young lady is a transexual and has been treated for the past year. She's not allergic to anything. She's been on estrogen for about a year and a half and stopped. Insurance has changed. She's taking care of three kids and she's busy. She's planning a surgery with Johns Hopkins at Tampa. She has been cleared with Dr. Ferrell who referred her up here. She has no history of lupus or any hypertension problems, although today her blood pressure is up and she's quite heavy.

OBJ.; ~~Heart sounds, normal. Carotids, normal. Thyroid,~~
normal. She says her blood pressure stays normal at home.

PLAN;
1. Premarin 0.3, twice a day
2. RTC three weeks. If pressure is not down then, we'll add Aldactone. We'll see.

JHB/ch

6-30-03 Wt 304 Ht 5'8 1/2" BIP

138/86 14

ARIEL ADLA
JUNE 30, 2003

SUB.; She's doing quite well. She's taking her medication. She stopped the Effexor on her own. She's taking Premarin 0.32 a day without problems. Her blood pressure is acceptable.

PLAN;
1. Add Aldactone, 100mg. day, using generic.
2. RTC six months

JHB/ch

— EXHIBIT #3 —

Johnson, Renaul

ID#: 166237

1464

Menest

1.25MG / Tab

Prescriber: Barnes, Robert

A467 - Fountain Correctional Facility - Population **Keep On Person**

Take 1 tablet(s) by mouth Three
Times Daily

251560485

Fill: 6/15/2006

Stop: 9/23/2006

Start: 5/27/2006

NFA thru:

RPh:



QTY: **30** of 90

2 of 3 **FR13C10**

Secure Pharmacy + - 1.800.833.2510 - DEAF/S897079
#16 Mary Lindsey Pelt Dr. Suite 515 Franklin, TN 37067
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New feature: After this date, this label is no longer valid.

EXHIBIT #4

**IN THE CIRCUIT COURT OF
ESCAMBIA COUNTY ALABAMA**

RE'NAUL M. JOHNSON**Plaintiff,**

v.

JERRY FERRELL, et. al**Defendant**

)
)
)
)
) **CV 2005-21.60**
)
)
)
)

AFFIDAVIT

Before me, the undersigned authority, personally appeared Jerry Ferrell, who is known to me, and who, after being by me first duly sworn according to the law deposes and says that he is informed of and has personal knowledge of the matters set forth in this Affidavit.

My name is Jerry Ferrell. I am currently employed as Warden III with the State of Alabama Department of Corrections at Fountain Correctional Facility, Atmore, Alabama. I am over twenty-one years of age.

I have read Case No. CV-2005-21.60 and understand plaintiff to allege that he has been denied medical, dental, and psychological treatment while assigned at G.K. Fountain Correctional Center and that as a result plaintiff has suffered pain and mental anguish.

This defendant avers that medical, dental and psychological treatment is available. Inmates request medical, dental treatment via institutional medical/dental screening. This defendant avers that plaintiff has been seen for medical and dental complaints. Plaintiff's medical complaints have centered around plaintiff seeking a "sex change" procedure and/or hormone therapy. As a warden

**DEFENDANT'S
EXHIBIT**

5

of a male correctional facility and as a taxpayer of the State of Alabama this defendant hopes and prays that medical treatment in that form is denied and will continue to be denied. This defendant avers that plaintiff has not been denied other reasonable medical treatment.

This defendant avers that plaintiff has requested and received dental treatment. Records reflect that dental personnel have recommended an extraction of plaintiff's tooth but plaintiff has refused an extraction and requested a temporary filling and has twice received a temporary filling per his request.

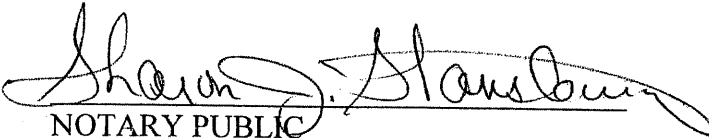
Records also reflect plaintiff is seeing mental health on a regular basis and is being treated with medication.

This defendant avers that medical, dental and psychological treatment has been and continues to be received by plaintiff, less and except a sex change procedure and/or hormone treatment.

FURTHER AFFIANT SAYETH NAUGHT.


JERRY FERRELL

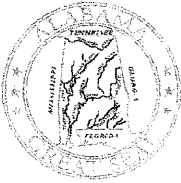
Sworn and subscribed to before me
this 18th day of February 2005.


NOTARY PUBLIC

My Commission Expires Aug. 20, 2007

MY COMMISSION EXPIRES

EXHIBIT #5



BOB RILEY
GOVERNOR

State of Alabama
Alabama Department of Corrections

301 South Ripley Street
P. O. Box 301501
Montgomery, AL 36130



Donal Campbell
COMMISSIONER

November 16, 2005

ADMINISTRATIVE REGULATION
NUMBER 637

OPR: TREATMENT

GENDER IDENTITY DISORDER

I. GENERAL

This Alabama Department of Corrections (ADOC) Administrative Regulation (AR) establishes the responsibilities, policies, and procedures to ensure a standard of care for the treatment of transsexual inmates.

II. POLICY

It is the policy of the ADOC to provide the appropriate treatment to inmates meeting the criteria for the DSM-IV diagnosis of Gender Identity Disorder.

III. DEFINITIONS

See AR 602, *Mental Health Definitions*, for a definition of the following terms used in this AR:

Gender Identity Disorder

Hormonal Replacement Treatment

Sexual Reassignment Therapy

Sex Offender

Transsexualism

Gender Identity Disorder Management and Treatment Committee

IV. RESPONSIBILITIES

- A. The Director of Treatment is responsible for ensuring that all ADOC staff and contracted mental health staff are aware of this AR.
- B. The Gender Identity Disorder Management and Treatment Committee is responsible for determining the appropriate treatment plan for identified inmates.

V. PROCEDURES

- A. Inmates will be assigned to an ADOC Institution in accordance with their gender as determined by their external genitalia.
- B. The initiation of sexual reassignment is prohibitive in a correctional setting. Self-inflicted genital mutilation or other forms of self-mutilation are contraindications for sexual reassignment treatment.
- C. Inmates entering ADOC with prior surgical alteration of genitals and/or hormonal therapy procedures will continue to receive maintenance hormone replacements.
- D. The institutional Psychiatrist will refer any inmate presenting with symptoms of Gender Identity Disorder to the Gender Identity Disorder Management and Treatment Committee.
 - 1. The committee is comprised of the ADOC Medical Director, Contract Chief Psychiatrist, and ADOC Director of Treatment.
 - 2. A medical specialist in the treatment of transsexuals may be retained as a consultant on specific cases.
 - 3. The diagnosis of Gender Identity Disorder will be based on DSM-IV criteria and will be assigned and/or approved by this committee. This committee will:
 - a. Conduct an evaluation of each identified inmate.
 - b. Develop an individualized treatment plan for each identified inmate.
 - c. The treatment plan will address medical, mental health, and personal adjustment needs.
- E. Sexual reassignment treatment:
 - 1. No surgical procedures for the purpose of sexual reassignment will be provided to any inmate incarcerated in the ADOC.

2. Treatment with hormonal medications for the purpose of sexual reassignment treatment will not be initiated while incarcerated in the ADOC.
 3. An inmate receiving hormonal medications as part of an established sexual reassignment treatment regimen under the supervision of a medical doctor at the time of incarceration will be allowed to continue hormonal medications.
 4. Prior sexual reassignment treatment must be verified through the request of medical records.
- F. Statistical data gathered concerning inmates identified with a Gender Identity Disorder will be recorded on ADOC Form MH-015, *Psychological Evaluation* or ADOC Form MH-014, *Psychological Evaluation Update*, for monthly reporting to the ADOC Director of Treatment.

VI. DISPOSITION

Refer to AR 601, *Mental Health Forms and Disposition*.

VII. FORMS

Refer to AR 601, *Mental Health Forms and Disposition*, for any form(s) used in this regulation.

VIII. SUPERCEDES

This regulation being a new regulation does not supercede any other regulation at this time.

IX. PERFORMANCE This AR is published under the authority of:

- A. National Commission of Correctional Health Care: Standards for Health Services in Prisons 2003. (P-A-09).
- B. Department of Mental Health and Mental Retardation Statutory Authority: The Code of Alabama, 1975, Section 22-50-11.
- C. Health Insurance Portability and Accountability Act of 1996 (HIPAA).


Donal Campbell, Commissioner

DATE _____

TIME

NOTES

2/4/05

874

(5) mainly, central - reports expression to be made; stress level = so can act on by adding about getting red as predicted. Example in red coat dog.

(6) - 2650 where L, M, R, C, OX & - expression not shown both stable

(A) stable in control red, see if ok.

DD 1 DD 1

2. *[Handwritten signature]*

2/7/05

5 Pt. seen monthly contact of reported
s/s of dep. reported being anxious while
in self-concept class. "I want to be
dropped from the class." Pt. states the
reason for anxiety to be peers unable to
"get on the same level of reasoning" as
to peers not being of the same or similar
intelligence.

0364/0 BM alert, Orientated, Rational

At stable

P: see in Yarks for monthly contact

S. being treated is people and well-being. It's not helping except for the fact that frequency of moral change is not her demand.

• Anxiety has been a constant

I was taking hormone treatments up until 2 1/2 months ago and that's what I think has me out of control.

- I am not getting psychotherapy for my Gender Dysphoria.

Being around all of these men and my job gives the chamberlains rather a lot to talk about, seeing the gaps in their underwear.

Have found some red phosporous full others are too depressing due to the stones. Worry that I have had to go & leavey about.

No. 1000 [Central records] education / history

Group therapy helps me to deal with how others perceive me.

0. Good appearance, lucid, coherent and spontaneous. Affect within normal limits & now being depressed. [Sylvester is a 6-7 on a 10 scale.]

CONFIDENTIAL MEDICAL RECORDS

2-05

Patient's Name, (Last, First, Middle)	AIS#	Age	R/S	Facility
Johnson, Renard	166237	36	B/m	FCC

F-61

CONFIDENTIAL MEDICAL RECORDS

F-61

IN DISCIPLINARY PROGRESS NOTES

DATE	TIME	NOTES	SIGNATURE
1-13-05	Continued	Inmate stated Dr. Prince prescribed medication to increase alertness and since he has been incarcerated and off meds, it's hard to maintain. O: 36 yr old M, alert, irritable, relaxed as session continued A: Overwhelmed P: See in 4 wks as needed f/u w/ nurse/medical to assess sleep d/o	
1-28-05	1540	Inmate seen in office S: I'd like it moved to AM. I was supposed to take it in AM, but missed. That's a I had diabetic finger sticks, so I wanted it @ PM. But now that I have to get up & get finger sticks @ 3A, I'd get my meds then, too. O: A.A.O. denies ST, HI, halluc. SE. MAR shows many blanks for med admin. Reports heard Dr. Brown wrote note to PMO re hormone therapy; upset re feeling he's getting "run around" about getting Premarin therapy. Reviewed request re time A for Prozac & Wellbutrin. A: Gender identity %, depression, anxiety. P: Continue Prozac 40mg & Wellbutrin 150, but % HS & move to AM. RTC 2-3 mos.	Dr. Brown, Ph.D. M.D.
			R. Earnshaw M.D.

Patient's Name, (Last, First, Middle)	AIS#	Age	R/S	Facility
Johnson, Renaul	1166237	36 M		FCC

ALABAMA DEPARTMENT OF CORRECTIONS
 MENTAL HEALTH SERVICES
 PSYCHIATRIC EVALUATION
 PAGE 1

CONFIDENTIAL MEDICAL RECORD

Referred by:

☒ Admission to Institution ☐ Mental Health Staff ☐ Medical Staff ☐ Other _____

Reason for Referral (Presenting Problem):

Prozac 20 q day Mood swings 2° missing Premarin.
 Wellbutrin 75 BID "If I can't get Premarin, I'll
 have to come off antidepressants"

Psychiatric History (inpatient/outpatient/medications prescribed):

36yo BM. 04 hosps. 12yo YMD - Gender dysphoria.
 Dothan YMD.

Effexor

FH: YMD ① hx paranoid schiz.

sister "nervous breakdown
 last Jan.

mom's bro hosp

first suicide attempt

mom
 needs to be
 (s's trying to
 commit bro).

MVA

Pertinent Medical History:

Pyridium => allergic rash.
 4 mos a scheduled gender reassignment surg.
 Premarin
 needs antiHTN & Effexor.

Substance Abuse History: (would have been teen suicide &)

Denies.

MJ as teen.

Pertinent Personal/Family History (inmate's sentence):

50yrs (earliest. 9/21/53) legal conspiracy - Montel & Oprah
 Out of system 7yrs. waiting for papers.

Dothan Mom (some issues, now supportive), sister.
 military parents.

4 kids 19, 15, 8, 6, 3
 bro's bio kids. ♀ ♂ ♂ ♂
 (adopted). Grad HS

Institutional Adjustment (current placement):

Fountain x 2 wks, Kilby x 2 wks.
 County x 8 mos.

Inmate Name

Johnson Renaul

AIS #

166237

ALDOC Form 449-05 (Page 1 of 2)

IN DISCIPLINARY PROGRESS NOTES

DATE	TIME	NOTES	SIGNATURE
12-29-04		<p>S: Sub. seen in office for Monthly contact "I am having a bad day". Ref to environment time to serve and circumstances pertaining to hormone treatment Pt. crying at beginning of contact, contained emotions as session continued. Voiced interest in MH group (self-concept), O/SI on HT, Reports meds are helpful in s/s of depression & anxiety but mood swings had state that hormones maybe a contributing factor. O Hallucinations V or A reported</p> <p>O 36 Y/O B/M Emotional (crying) initially relaxed as session continued O x4 rational</p> <p>A: Overwhelmed</p> <p>P: 1 Enroll in self concept group</p> <p>2 see monthly or as needed</p>	
1-13-05		<p>S: Inmate seen today to discuss clinical treatment plan goals and objectives. Inmate in agreement w/ plan. Signature was obtained. Inmate complained about not receiving "Hormone Treatment" He stated he also continue to have difficulty staying up during the AM. Inmate reported that he had been taking medication to help him stay awake during the day. Inmate provided a name "Dr. Allen Prince" Dothan Alabama (A Neurologist). He stated his records were under the name "Arrel Adala".</p>	<p>L Richardson, MS, MHP</p> <p>Continued</p>

CONFIDENTIAL MEDICAL RECORDS

Patient's Name, (Last, First, Middle)	AIS#	Age	R/S	Facility
Johnson, Renaul	166237	36	B/M	FCA

PHS

EXHIBIT # 17

Nursing Evaluation 1001:

General Sick Call

Facility: Alabama Department of Corrections

Patient Name: Johnson, RenaulInmate Number: 166237 LastDate of Birth: 04, 14, 1966
MM DD YYYYDate of Report: 2, 16, 2006
MM DD YYYYTime Seen: 2130 AM/PM Circle OneSubjective: Chief Complaint(s): DOC advised me to do a sick call request to continueOnset: my hormone therapyBrief History: Hormone therapy
(Continue on back if necessary)☐ Check Here if additional notes on backObjective: Vital Signs: (As Indicated) T: 99.0 P: 103 RR: 20 BP: 110 / 77 0293%
wt 280Examination Findings: On going conflict & medical pertain to hormone therapy
(Continue on back if necessary)☐ Check Here if additional notes on backAssessment: (Referral Status)Preliminary Determination(s): N/A☐ Referral NOT REQUIRED☒ Referral REQUIRED due to the following: (Check all that apply)☐ Recurrent Complaint (More than 2 visits for the same complaint)☒ Other: Stated advised by DOCComment: You should contact a physician and/or a nursing supervisor if you have any concerns about the status of the patient or are unsure of the appropriate care to be given.
UD appt 3/1/06 Rescheduled for 3/21/06
Due to work/Seg work
Cap appt disp. OffsitePlan: Check All That Apply:☐ Instructions to return if condition worsens.☐ Education: The patient demonstrates an understanding of the nature of their medical condition and instructions regarding what they should do as well as appropriate follow-up. ☐ YES ☐ NO (If NO then schedule patient for appropriate follow-up visits)☐ Other: _____OTC Medications given ☒ NO ☐ YES (If Yes List): _____Referral: ☐ NO ☒ YES (If Yes, Whom/Where): Doctor BarnesDate for referral: 1 / 1 / 2006
MM DD YYYY
Time _____Referral Type: ☒ Routine ☐ Urgent ☐ Emergent (if emergent who was contacted?): _____x S. Gaillard LPN
Nurses SignatureName: S. Gaillard LPN

Printed

2/16/2006



Nursing Evaluation Tool:

General Sick Call

Facility: Fountain Correctional Facility		FOR PROFESSIONAL USE ONLY CONFIDENTIAL RECORD NOT TO BE PHOTO COPIED	
Patient Name: <u>Johnson</u>	<u>Renau</u>	First	Last
Inmate Number: <u>166237</u>	Date of Birth: <u>4</u> / <u>14</u> / <u>68</u>	MM	DD
Date of Report: <u>11</u> / <u>12</u> / <u>05</u>	Time Seen: <u>1125</u>	MM	DD
	AM / PM Circle One		

Subjective: Chief Complaint(s): Lymph Nodes are swollen, I've been nausea and vomiting

Onset: Since last night.

Brief History: Complaints of Nausea and Vomiting
(Continue on back if necessary)

☐ Check Here if additional notes on back

Objective: Vital Signs: (As Indicated) T: 98.5 P: 99 RR: 18 B/P: 108 / 70

Examination Findings: Razor bumps on face
(Continue on back if necessary)

☐ Check Here if additional notes on back

Assessment: (Referral Status)

Preliminary Determination(s):

☒ Referral **NOT REQUIRED**

☐ Referral **REQUIRED** due to the following: (Check all that apply)

☐ Recurrent Complaint (More than 2 visits for the same complaint)

☐ Other: _____

Comment: You should contact a physician and/or a nursing supervisor if you have any concerns about the status of the patient or are unsure of the appropriate care to be given.

Plan: Check All That Apply:

☒ Instructions to return if condition worsens.

☒ Education: The patient demonstrates an understanding of the nature of their medical condition and instructions regarding what they should do as well as appropriate follow-up. ☐ YES ☐ NO (If NO then schedule patient for appropriate follow-up visits)

☒ Other: Benzoin Peroxide
(Describe)

OTC Medications given ☐ NO ☐ YES (If Yes List): _____

Referral: ☒ NO ☐ YES (If Yes, Whom/Where): _____

Date for referral: 1 / 1 / 05
MM DD YY
Time _____

Referral Type: ☐ Routine ☐ Urgent ☐ Emergent (if emergent who was contacted?): _____

J. Owens LPN

J. Owens



PRISON
HEALTH
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EMERGENCY

ADMISSION DATE 7/17/05		TIME 1650 (AM/PM)	ORIGINATING FACILITY 7cc	FOR PROFESSIONAL USE ONLY CONFIDENTIAL RECORD NOT TO BE PHOTO COPIED	
ALLERGIES Penicidium			CONDITION ON ADMISSION <input checked="" type="checkbox"/> GOOD <input type="checkbox"/> FAIR <input type="checkbox"/> POOR <input type="checkbox"/> SHOCK <input type="checkbox"/> HEMORRHAGE <input type="checkbox"/> COMA		
VITAL SIGNS: TEMP 98.9		ORAL RECTAL	RESP. 18	PULSE 99	B/P 120/70
NATURE OF INJURY OR ILLNESS S-I'm dizzy, been throwing up, and a headache since this afternoon on + off. I've thrown up about 3 x today and I have diarrhea.			ABRASION /// CONTUSION # BURN xx FRACTURE Z LACERATION / SUTURES		
PHYSICAL EXAMINATION O-BU assisted to HU per Col Murphy. Clo of dizziness, feeling like he is going to pass out. Symptoms started today. Unable to hold anything on stomach.					
A-Net in comfort			ORDERS / MEDICATIONS / IV FLUIDS ① Maalox 30mL BID x 5 days 7-18-05 Ruvins + OR - R+ PRN. Ruv j B md		
P-mj			TIME BY		
DIAGNOSIS					
INSTRUCTIONS TO PATIENT					
DISCHARGE DATE 7/17/05		TIME AM/PM	RELEASE / TRANSFERRED TO <input checked="" type="checkbox"/> DOC <input type="checkbox"/> AMBULANCE <input type="checkbox"/>	CONDITION ON DISCHARGE <input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> POOR <input type="checkbox"/> FAIR <input type="checkbox"/> CRITICAL	
NURSE'S SIGNATURE J. Gohagan		DATE 7/17/05	PHYSICIAN'S SIGNATURE Ruv j B md	DATE 7-18-05	CONSULTATION
INMATE NAME (LAST, FIRST, MIDDLE) Johnson, Renauel			DOC# 166237	DOB 4/14/68	R/S BM FAC. 7cc



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EMERGENCY

ADMISSION DATE 5/12/05		TIME 2:40 PM	ORIGINATING FACILITY FCC		FOR PROPTICK CALL CONFIDENTIAL	<input type="checkbox"/> EMERGENCY <input type="checkbox"/> OUTPATIENT																					
ALLERGIES Pyridium			CONDITION ON ADMISSION NOT TO BE PHOTO COPIED <input type="checkbox"/> GOOD <input type="checkbox"/> FAIR <input type="checkbox"/> POOR <input type="checkbox"/> SHOCK <input type="checkbox"/> HEMORRHAGE <input type="checkbox"/> COMA																								
VITAL SIGNS: TEMP 99.2		RESP. 20	PULSE 88		BP 128/86																						
NATURE OF INJURY OR ILLNESS S- Every since I've been off my Premarin I've been having hot flashes and I'm having them bad today. I was taking Premarin 1.25mg TID but I've been off them now for 4 months.			<table border="1"> <tr> <td>ABRASION ///</td> <td>CONTUSION #</td> <td>BURN xx xx</td> <td>FRACTURE Z Z</td> <td>LACERATION / SUTURES</td> </tr> </table>				ABRASION ///	CONTUSION #	BURN xx xx	FRACTURE Z Z	LACERATION / SUTURES																
ABRASION ///	CONTUSION #	BURN xx xx	FRACTURE Z Z	LACERATION / SUTURES																							
PHYSICAL EXAMINATION O- To Clinic c/o having hot flashes skin warm and moist			<p>PROFILE RIGHT OR LEFT</p> <p>RIGHT OR LEFT</p>																								
A- All in comfort			<table border="1"> <tr> <th>ORDERS / MEDICATIONS / IV FLUIDS</th> <th>TIME</th> <th>BY</th> </tr> <tr> <td>NO NEW ORDERS</td> <td></td> <td></td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </table>				ORDERS / MEDICATIONS / IV FLUIDS	TIME	BY	NO NEW ORDERS																	
ORDERS / MEDICATIONS / IV FLUIDS	TIME	BY																									
NO NEW ORDERS																											
DIAGNOSIS REPORT of symptoms			INSTRUCTIONS TO PATIENT																								
DISCHARGE DATE 5/12/05		TIME 08:00 AM	RELEASE / TRANSFERRED TO DOC		CONDITION ON DISCHARGE <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> POOR <input type="checkbox"/> FAIR <input type="checkbox"/> CRITICAL																						
NURSE'S SIGNATURE [Signature]		DATE 5/12/05	PHYSICIAN'S SIGNATURE [Signature]		DATE 6-8-05																						
INMATE NAME (LAST, FIRST, MI) Johnson, Kenneth			DOC# 1161237	DOB 4-14-68	R/S Bm	FAC F																					



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EMERGENCY

ADMISSION DATE 4 / 4 / 05 0400		TIME AM PM	ORIGINATING FACILITY <input type="checkbox"/> SIR <input type="checkbox"/> PDL <input type="checkbox"/> ESCAPEE <input type="checkbox"/>		<input type="checkbox"/> SICK CALL <input type="checkbox"/> EMERGENCY <input type="checkbox"/> OUTPATIENT	
ALLERGIES Pyridium			CONDITION ON ADMISSION <input type="checkbox"/> GOOD <input checked="" type="checkbox"/> FAIR <input type="checkbox"/> POOR <input type="checkbox"/> SHOCK <input type="checkbox"/> HEMORRAGE <input type="checkbox"/> COMA			
VITAL SIGNS: TEMP 98.9			ORAL RECTAL	RESP. 20	PULSE 105	BP 146/92
NATURE OF INJURY OR ILLNESS S. "I'm dizzy"			<div style="display: flex; justify-content: space-between;"> <div> ABRASION /// CONTUSION # BURN xx xx FRACTURE Z Z LACERATION / SUTURES </div> <div> </div> </div> <div style="display: flex; justify-content: space-between;"> <div> </div> <div> </div> </div> <div style="text-align: right;">RIGHT OR LEFT</div>			
PHYSICAL EXAMINATION O - pt. fell to the floor in lobby area, then again in the HCU hall, c/o chest pain, headache, + backache A - All. in comfort			ORDERS / MEDICATIONS / IV FLUIDS P - Dr. Barnes notified, Indocin 50 mg PRN x 10 days 600 mg of Guaifenesin, + 325 mg of Tylenol, + 60 mg of Sudafed x 3 days per Dr. Barnes, 1st dose given. J. Harris, LPN			
DIAGNOSIS 4-7-05 Renauw			Physician's Signature: J. Barnes MD			
INSTRUCTIONS TO PATIENT Return to HCU if problems persist or worsen						
DISCHARGE DATE 4 / 4 / 05 04		TIME AM PM	RELEASE / TRANSFERRED TO <input checked="" type="checkbox"/> DOC <input type="checkbox"/> AMBULANCE <input type="checkbox"/>		CONDITION ON DISCHARGE <input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> POOR <input type="checkbox"/> FAIR <input type="checkbox"/> CRITICAL	
NURSE'S SIGNATURE J. Harris, LPN		DATE 4-7-05	PHYSICIAN'S SIGNATURE J. Barnes MD		DATE 4-7-05	
INMATE NAME (LAST, FIRST, MIDDLE) Johnson, Renauw			DOC# 166231	DOB 4-14-68	R/S B/M	FAC. FCC



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EMERGENCY

ADMISSION DATE 2/10/05		TIME 0440 AM PM	ORIGINATING FACILITY FCC <input type="checkbox"/> SIR <input type="checkbox"/> PDL <input type="checkbox"/> ESCAPEE <input type="checkbox"/>		<input type="checkbox"/> SICK CALL <input type="checkbox"/> EMERGENCY <input type="checkbox"/> OUTPATIENT		
ALLERGIES Pyridium			CONDITION ON ADMISSION <input type="checkbox"/> GOOD <input type="checkbox"/> FAIR <input type="checkbox"/> POOR <input type="checkbox"/> UNSTABLE <input type="checkbox"/> HEMORRHAGE <input type="checkbox"/> COMA				
VITAL SIGNS: TEMP 97.5		ORAL RECTAL	RESP. 18		B/P 138/78 RECHECK IF SYSTOLIC <100> 50		
NATURE OF INJURY OR ILLNESS S" I just fainted I am Okay"			<div style="text-align: center;"> <p>NOT TO BE PHOTO COPIED</p> <p>CONFIDENTIAL RECORD</p> </div>				
			ABRASION ///	CONTUSION #	BURN xx xx	FRACTURE Z Z	LACERATION / SUTURES
PHYSICAL EXAMINATION O-Inmate to HCU - C/O fainting from come out of Kitchen area C/O dizzy - Denies any problem vision - Alert Oriented X3 Normal assessment NO SOB observe - NO bruises noted -			ORDERS / MEDICATIONS / IV FLUIDS				
			P- NOD to Review 2-10-05 Reviewed + OK (just done for present) Det J R med.				
DIAGNOSIS A- Alt in Health maintenance							
INSTRUCTIONS TO PATIENT E Return to HCU if any changes							
DISCHARGE DATE 1/1		TIME AM PM	RELEASE / TRANSFERRED TO		CONDITION ON DISCHARGE <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> POOR <input type="checkbox"/> FAIR <input type="checkbox"/> CRITICAL		
NURSE'S SIGNATURE S Daily RN		DATE	PHYSICIAN'S SIGNATURE Det J R med.		DATE 2-10-05		
INMATE NAME (LAST, FIRST, MIDDLE) Johnson Renaul			DOC# 106237	DOB 4/14/68	R/S Rm	FAC. FCC	